

FINANCIAL AFFIDAVIT			
IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE			
IN UNITED STATES	<input type="checkbox"/> MAGISTRATE	<input type="checkbox"/> DISTRICT	<input type="checkbox"/> APPEALS COURT <small>in</small>
<input type="checkbox"/> OTHER PANEL (Specify below)			
IN THE CASE OF		FOR	LOCATION NUMBER
<u>US</u> v.s. <u>Gerald Nastari</u>		AT	
PERSON REPRESENTED (Show your full name)		<input checked="" type="checkbox"/> Defendant—Adult <input type="checkbox"/> Defendant - Juvenile <input type="checkbox"/> Appellant <input type="checkbox"/> Probation Violator <input type="checkbox"/> Parole Violator <input type="checkbox"/> Habeas Petitioner <input type="checkbox"/> 2255 Petitioner <input type="checkbox"/> Material Witness <input type="checkbox"/> Other	
<u>Gerald Nastari</u>		DOCKET NUMBERS	
CHARGE/OFFENSE (describe if applicable & check box <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor		Magistrate <u>MT04-M-200JLA</u> District Court Court of Appeals	

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

<b>EMPLOYMENT</b>	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Am Self-Employed							
	Name and address of employer: _____							
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment _____						
	How much did you earn per month? \$ _____							
<b>OTHER INCOME</b>	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
	IF YES, how much does your Spouse earn per month? \$ _____							
	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____							
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No							
<b>CASH</b>	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES							
	RECEIVED	SOURCES						
	<u>\$300/mo</u>	<u>General relief</u>						
	I have you any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____							
<b>PROPERTY</b>	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT							
	VALUE	DESCRIPTION						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%; height: 20px;"></td><td style="width: 50%; height: 20px;"></td></tr> <tr><td style="height: 20px;"></td><td style="height: 20px;"></td></tr> <tr><td style="height: 20px;"></td><td style="height: 20px;"></td></tr> </table>							

<b>DEPENDENTS</b>	MARITAL STATUS		Total No. of Dependents	List persons you actually support and your relationship to them	
	<input checked="" type="checkbox"/> SINGLE		1	<u>son in college (20)</u>	
	<input type="checkbox"/> MARRIED			<u>other not</u>	
	<input type="checkbox"/> WIDOWED				
<input type="checkbox"/> SEPARATED OR DIVORCED					
<b>DEBTS &amp; MONTHLY BILLS</b>	APARTMENT OR HOME:		Creditors	Total Debt	Monthly Paymt.
	<u>2</u>			\$ _____	\$ _____
				\$ _____	\$ _____
				\$ _____	\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)Gerald Nastari2-13-04G.B.